

N100000008874

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

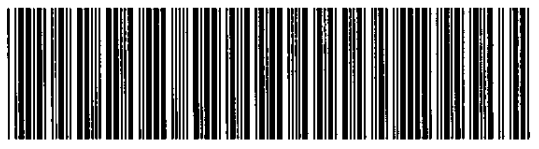
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
12 JUN 29 PM 3:44

R.A. Rolch
@ 6/29/12

COVER LETTER

TO: • Amendment Section
• Division of Corporations

SUBJECT: Osceola Senior Softball Corporation
Name of Corporation

DOCUMENT NUMBER: N10000008874

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Rick Arleo *Richard M. Arleo*
Name of Contact Person

Osceola Senior Softball Corporation
Firm/Company

2338 Kings Crest Rd
Address

Kissimmee, FL 34744
City/State and Zip Code

gman527@aol.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Angel Bermudez at (407) 944-0967
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 14, 2012

RICK ARLEO
OSCEOLA SENIOR SOFTBALL CORPORATION
2338 KINGS CREST RD
KISSIMMEE, FL 34744

SUBJECT: OSCEOLA SENIOR SOFTBALL CORPORATION
Ref. Number: N10000008874

We have received your document for OSCEOLA SENIOR SOFTBALL CORPORATION and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

Please list the new registered agent name to reflect the signature.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton
Regulatory Specialist II

Letter Number: 712A00014242

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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

2012 JUN 29 AM 9:19

REGISTRY OF FIRMS

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Osceola Senior Softball Corporation
2. The principal office address: 2338 Kings Crest Rd. Kissimmee, Fl 34744
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 9/20/2010 Document number: N10000008874

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Alexander A. Frisenda, Jr.
7035 Big Bend Drive
S. Cloud, Fl 34771

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

~~Rick Arleo~~ Richard M. Arleo
2338 Kings Crest Rd
P.O. Box NOT acceptable
Kissimmee, Fl 34744

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The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Richard M. Arleo
Signature of an officer or director

Richard M. Arleo - Treasurer
Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity, I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Richard M. Arleo
Signature of Registered Agent

May 5th, 2012
Date

If signing on behalf of an entity:

Typed or Printed Name

*** FILING FEE: \$35.00 ***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314